

CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

County: Meade

Location listed as:

Section-Township-Range: None Given

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): \_\_\_\_\_

Location changed to:

10-315-26W

SE SE NE NE

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

verification method: Latitude & longitude, KGS' "LEO" conversion tool,  
county ownership map, and mapping tool on KGS website.

initials: DR date: 7/9/2009

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726  
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

[Empty box for application number]

1 LOCATION OF WATER WELL: County: <u>Meade</u>	Fraction	Section Number	Township Number	Range Number
	1/4    1/4    1/4		T    S	R    E/W

Distance and direction from nearest town or city street address of well if located within city?

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: 37° 22.187'

Longitude: 100° 07.749'

Elevation: 2557

Datum: \_\_\_\_\_

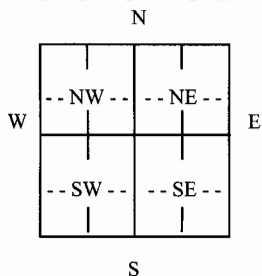
Data Collection Method: WGS 84

2 WATER WELL OWNER: Robert Zielke

RR#, St. Address, Box # : \_\_\_\_\_

City, State, ZIP Code : \_\_\_\_\_

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 203 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL..... 90 ft. below land surface measured on mo/day/yr. 2-25-09

Pump test data: Well water was..... 90 ft. after..... 1 hours pumping..... 50 gpm

Est. Yield. 50 gpm: Well water was..... ft. after..... hours pumping..... gpm

WELL WATER TO BE USED AS: 5 Public water supply    8 Air conditioning    11 Injection well

Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below)

2 Irrigation    4 Industrial    7 Domestic (lawn & garden)    10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes ..... No ; If yes, mo/day/yr Sample was submitted.....

Water well disinfected? Yes  No .....

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued. <input checked="" type="checkbox"/>	Clamped.....
<input checked="" type="checkbox"/> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded.....	
		7 Fiberglass		Threaded.....	

Blank casing diameter ..... 5 in. to 16.5 ft., Diameter. .... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface..... 18 in., Weight ..... lbs./ft. Wall thickness or gauge No. 200+

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="checkbox"/> PVC	9 ABS	11 Other (Specify) .....
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<input checked="" type="checkbox"/> Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut	10 Other (specify) .....	

SCREEN-PERFORATED INTERVALS: From..... 16.5 ft. to 203 ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From..... 20 ft. to 203 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement    2 Cement grout     Bentonite    4 Other .....

Grout Intervals: From ..... 4 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	<input checked="" type="checkbox"/> Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	

Direction from well? E How many feet? 8

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	18	sand			
18	30	grey clay			PW PIPE SDK-21
30	82	tan sandy clay			Eagleloc well casing
82	160	sand stone			Hustings, NE
160	203	sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 2-25-09 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 101 This Water Well Record was completed on (mo/day/year) 2-25-09 under the business name of Bartel Well Drilling Inc by (signature) Reuben J Bartel

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.